PTO/SB/05 (08-00)

Approved for use through 10/31/2002. OMB 0651-0032

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UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No. First Inventor

(Only for new nonprovisional applications under 37 CFR 1.53(b))

METHOD AND APPARATUS FOR POYIDING TRAVEL INFORMATION Express Mail Label No.

| APPLICA | Application Elements | | ADDRESS TO: Assistant Commissioner for Pate Box Patent Application | | | | | | | |
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| See MPEP chapter 600 concerning utility patent application contents. | | | | | atent Applic ington, DC | | | | | |
| 1. Fee Transmittal F | form (e.g., PTO/SB/17) duplicate for fee processing) | 7. | 7. CD-ROM or CD-R in duplicate, large table or | | | | | | | |
| 2. Applicant claims to See 37 CFR 1.27 | small entity status. | 8. | Computer Pr Nucleotide and/or A | Submisson | | | | | | |
| 3. Specification (preferred arrangement | (Total Pages T&) | а | (II applicable, all ne | cessary) | | | | | | |
| - Descriptive title | of the invention | _ | . Specification Se | | | , s.55. | | | | |
| Statement Reg | to Related Applications arding Fed sponsored R & D | _ | i.□ CD-RO | | _ | | | | | |
| - Reference to se | equence listing, a table, program listing appendix | | li.□ paper | | 55-11 (2 copies), 61 | | | | | |
| Background of | the Invention | | c. Statements verifying identity of above copies | | | | | | | |
| - Brief Summary - Brief Descriptio | on of the Drawings (if filed) | Ĺ | ACCOMPANYING APPLICATION PARTS | | | | | | | |
| Detailed Descri Claim(s) | ption | 9 | Assignment Papers (cover sheet & document(s)) | | | | | | | |
| - Abstract of the | Disclosure | 10 |). 37 CFR 3.7 (when there | | | Power of Attorney | | | | |
| 4. Drawing(s) (35 U | I.S.C. 113) [Total Sheets 🐴] | 11 | $\overline{}$ | | | f applicable) | | | | |
| 5. Oath or Declaration | [Total Pages 🔲] | 12 | Information Statement | | | Copies of IDS Citations | | | | |
| a. Newly executed (original or copy) Copy from a prior application (37 CFR 1.63 (d)) | | | 13. Preliminary Amendment | | | | | | | |
| (for continuation/divisional with Box 17 completed) | | | 14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized) | | | | | | | |
| i. <u>DELET</u> Signed sta | ION OF INVENTOR(S) stement attached deleting inventor(s) | 15 | 15. Certified Copy of Priority Document(s) (if foreign priority is dairned) | | | | | | | |
| named in t | the prior application, see 37 CFR and 1.33(b). | 16 | : | | | | | | | |
| 6. Application Data | | Other: | | | | | | | | |
| | | | | | | | | | | |
| 17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) of prior application No.: | | | | | | | | | | |
| Print sunfication information | | | | | | | | | | |
| For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the address of | | | | | | | | | | |
| | the disclosure of the accompanying creliod upon when a portion has been in | | | | | | | | | |
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| Name | Dekel Pat | ent L | td. | | | | | | | |
| A -1.1 | 12 HaEgoz | Strect | , Apt. 4 | | | | | | | |
| Address | | | · | | | | | | | |
| City | Reharot | State | | | Zip Code | | | | | |
| Country | Israel | Telephone | 972-8-9412 | 697 | Fax | 972-8-9352579 | | | | |
| Name (Print/Type) | David Klein | R | egistration No. (A | ttorney/A | gent) | 41.118 | | | | |
| Signature | David Illei | | | | | Jan 01 | | | | |
| urden Hour Statement: This fame | In | | | | | <u>- ~/!</u> | | | | |

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| | D. | Complete if Known | | | | | | | |
| FEE TRANSMITTA | | Application Number | | | | | | | |
| for FY 2001 | | Filing | Date | | | | | | |
| | First Named Invento | | ventor | Δ | cie | Heima | | | |
| Branch and the second and | Examiner Name | | | | Fleima | | | | |
| Patent fees are subject to annual revision. | | | | | е | | | | |
| TOTAL AMOUNT OF PAYMENT (\$) 355 | | Group Art Unit | | | | | | | |
| (4) 335 | i | Altor | ney D |)ocke | t No. | | | | |
| METHOD OF PAYMENT | FEE CALCULATION (continued) | | | | | | | | |
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| indicated fees and credit any overpayments to: Deposit | Large Entity Small Entity Fee Fee Fee Fee Fee Fee Fee Description Fee Page | | | | | | | i | |
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| Charge Any Additional Fee Required | 139 | 130 | 139 | 130 | | | lication | | |
| Under 37 CFR 1.16 and 1.17 | | 2,520 | 147 | | | glish spec | <u> </u> | | |
| Applicant claims small entity status. See 37 CFR 1.27 | 112 | | | | | g a reque iting public | | | |
| 2. Payment Enclosed: | | | | | Examin | er action | | | |
| Check Credit card Money Other | 113 | 1,840* | 113 | 1,840 | Reques Examin | iting public er action | cation of Sif | R after | i |
| FEE CALCULATION | 115 | 110 | 215 | 55 | Extens | ion for rep | <u> </u> | | |
| 1. BASIC FILING FEE | 116 | 390 | 216 | 195 | Extensi | on for repl | | | |
| Large Entity Small Entity | 117 | 890 | 217 | 445 | Extensi | on for repi | <u> </u> | | |
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| 101 710 (201 355 Utility filing fee 3 55 | 128 | 1,890 | 228 | 945 | Extensi | on for repl | ly within fifth | month | <u></u> |
| 106 320 206 160 Design filing fee | 119 | 310 | 219 | 155 | Notice | of Appeal | | | |
| 107 490 207 245 Plant filing fee | 120 | 310 | 220 | | | | pport of an | appeal | |
| 108 710 208 355 Relssue filing fee | 121 | 270 1,510 | 221 135 Request for oral hearing 138 1,510 Petition to institute a public use proceeding | | | | | | |
| 114 150 214 75 Provisional filing fee | 140 | | 240 | 55 | Petition | | | | |
| SUBTOTAL (1) (\$) 355 | | 1,240 | | 620 | | to revive | | | |
| 2. EXTRA CLAIM FEES | 1 | - | 242 | | | sue fee (c | | | |
| Fee from Extra Claims below Fee Paid | 143 | 440 | 243 | 220 | | issue fee | , | | |
| Total Claims20** = X = | 144 | 600 | 244 | 300 | Plant is | sue fee | | | |
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| Multiple Dependent | 123 | 50 | 123 | 50 | Petition | s related to | o provisiona | l applications | |
| Large Entity Small Entity | 126 | 240 | 126 | 240 | Submis | sion of Info | ormation Dis | sclosure Stmt | |
| Fee Fee Fee Fee Description | 581 | 40 | 581 | 40 | | | atent assign | | |
| Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20 | 146 | 710 | 246 | 355 | | | umber of pro on after final | , | <u> </u> |
| 102 80 202 40 Independent claims in excess of 3 | | | | | (37 CFI | ₹§ 1.129(| a)) | rejectori | <u> </u> |
| 104 270 204 135 Multiple dependent clalm, if not paid | 149 | 710 | 249 | 355 | For eac | h addition | R § 1.129(t | to be | |
| 109 80 209 40 ** Reissue Independent claims | 179 | 710 | 279 | 355 | | | - • | ination (RCE) | |
| over original patent 110 18 210 9 ** Reissue claims in excess of 20 | 169 | 900 | | 900 | | | | • • | |
| 110 18 210 9 ** Reissue claims in excess of 20 and over original patent | .55 | 230 | | 500 | of a de | sign appli | dited exami cation | HAMUH | L |
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| SUBMITTED BY | | | | | | | | | |
| Committee and the second of th | | Registre | tion M | o. T | 4 . | _ | | if applicable) | |
| Name (Print) Type) David Klain | | Attomey | (Agent) | | <u>41)</u> | 18 | Telephone | 1972-8- | 941-2697 |

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